

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF IOWA**

PAUL DORR, AND ALEXANDER
DORR, individually and on behalf of all
other persons similarly situated,

Court File No. 5:08-CV-04093

Plaintiffs,

vs.

DOUGLAS L. WEBER, individually
and in his capacity as Sheriff of Osceola
County; and OSCEOLA COUNTY,
IOWA,

Defendants.

**Declaration of Vincent J. Fahnlander
in Support of Plaintiffs' Motion for Leave to Amend their First-Amended
Complaint**

I, Vincent J. Fahnlander, declare as follows:

1. I understand this declaration is made under the provisions of 28 U.S.C. § 1746.
2. I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.
3. After the responses to Plaintiffs' written discovery requests and supplementation by the Defendants on July 30, 2009 (received by our office in August), I did inquire and work with defense counsel Douglas Phillips regarding the taking of depositions of all parties. Each side sought to schedule depositions in October but conflicts resulted in the scheduling of depositions in November 2009.
4. The deposition of Douglas Weber occurred on November 30, 2009 to accommodate his schedule.
5. Paul Dorr's deposition was also taken on November 30, 2009.

6. Alex Dorr's deposition could not be held as anticipated because of an illness, but continued to a mutually agreed date of January 13, 2010.
7. After reviewing the deposition of Douglas Weber, I determined that facts were sufficient to assert a First Amendment claim. I requested from defense counsel an acceptance of First Amendment allegations to which he agreed. Phillips requested, however, that Paul Dorr be made available for additional deposition testimony on the allegations.
8. I also promised and delivered to defense counsel on January 4, 2010, Plaintiffs proposed Second-Amended Complaint reflecting Paul Dorr's First Amendment claim. This occurred prior to the deposition of Paul Dorr and Alex Dorr held on January 13, 2010.
9. I have attached as examples of the type of documents received in response to Plaintiffs' written discovery. **See Exhibit A.** These typical documents do not discern the possibility of First Amendment claims as apparently admitted in Defendant Douglas Weber's deposition.
10. I have attached as **Exhibit B** the references to the deposition transcripts identified in Plaintiffs' brief in support of their motion for leave to amend their First-Amended Complaint:
 - a. Douglas Weber Tr. pp. 123 – 125;
 - b. Paul Dorr Tr. pp. 25-26; 29-30.
11. My office filed Plaintiffs' Second-Amended Complaint on January 4, 2010, a misstep contrary to the Rules of Court and this Court's Local Rules. The misstep was my responsibility for which I apologize to the Court.
12. Counsel for all parties have verbally agreed that upon the filing of the Second-Amended Complaint, defense counsel will answer the Complaint before the February 18, 2010 disposition motion deadline.

Dated: February 5, 2010.



Vincent J. Fahnlander

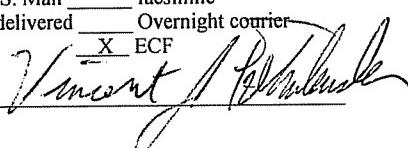
Copy to:

Douglas L. Phillips
Klass Law Firm, L.L.P.
Mayfair Center, Upper Level
4280 Sergeant Road, Suite 290
Sioux City, IA 51106

CERTIFICATE OF SERVICE

The undersigned certifies that the foregoing instrument was served upon all parties to the above cause to each of the attorneys of record herein at their respective addresses disclosed on the pleading on February 5, 2010.

By: U.S. Mail facsimile
 Hand delivered Overnight courier
 Other ECF

Signature 

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF IOWA
WESTERN DIVISION

PAUL DORR, AND ALEXANDER DORR, INDIVIDUALLY AND ON BEHALF OF ALL OTHER PERSONS SIMILARLY SITUATED,	NO. 5:008-cv-04093-MWB
Plaintiffs, vs. DOUGLAS L. WEBER, INDIVIDUALLY AND IN HIS CAPACITY AS SHERIFF, AND HIS SUCCESSORS, THE OSCEOLA COUNTY SHERIFFS DEPARTMENT, IOWA AND OSCEOLA COUNTY, IOWA, Defendants.	DEFENDANTS' INITIAL DISCLOSURES

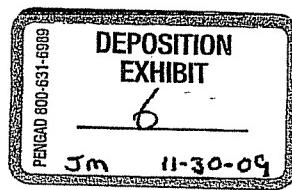
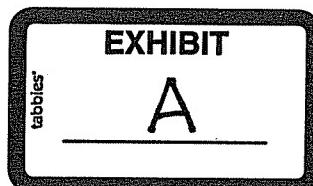
COME NOW Defendants Douglas Weber and Osceola County, Iowa, pursuant to F.R.Civ.P. 26, and make the following disclosures:

PERSONS WITH DISCOVERABLE INFORMATION

1. Douglas L. Weber
Osceola County Sheriff's Office
309 Sixth Street
Sibley, IA 51249

Sheriff Weber denied the permits at issue in this case and will testify concerning the reasons for his decisions.
2. Dan DeKoter
3. Kevin Hertz
4. Employees of:
 - a. Ocheydan Press/Melvin News
 - (1) Arlyn Pedley
 - (2) Lori Wiser
 - b. Worthington Daily Globe
 - c. Northwest Review
5. Members of the Public Safety Commission
6. Members of the Osceola County Board of Supervisors
7. Adri Ruisch
8. Lois Stahl
9. Don Hibbing

KLASS LAW FIRM,
LLP.



10. Arlin Pedley
11. Al and Judy Bruegemann
12. Kevin Wolfswinkel
13. Debra Dorr
14. Mrs. Bill Johnson
15. Dickinson County Sheriff Greg Baloun
16. Clay County Sheriff Randy Krukow

Defendant anticipates that some or all of these people have information about Paul Dorr's reputation and behavior.

DOCUMENTS

1. Paul Dorr Application for Permit to Carry, 2.1.98
2. Paul Dorr Application for Permit to Carry, 3.30.01
3. Paul Dorr Application for Permit to Carry, 4.6.02
4. Paul Dorr Application for Permit to Carry, 5.28.03
5. Paul Dorr Application for Permit to Carry, 6.29.04
6. Paul Dorr Application for Permit to Carry, 6.27.05
7. Paul Dorr Application for Permit to Carry, 7.19.06
8. Paul Dorr Application for Permit to Carry, 7.7.07
9. Alexander Dorr Application for Permit to Carry, 12.6.07

INSURANCE AGREEMENTS

1. Copies of the applicable declarations pages are attached.

Respectfully submitted,



Douglas L. Phillips
KLASS LAW FIRM, L.L.P.
Mayfair Center, Upper Level
4280 Sergeant Road, Suite 290
Sioux City, IA 51106
phillips@klasslaw.com
WWW.KLASSLAW.COM
712/252-1866
712/252-5822 fax

ATTORNEYS FOR DEFENDANTS

Copy to:

Vincent J. Fahnlander
33 South Sixth Street, Suite 4100
Minneapolis, MN 55402

Erick G. Kaardal
33 South Sixth Street, Suite 4100
Minneapolis, MN 55402

CERTIFICATE OF SERVICE

The undersigned certifies that the foregoing instrument was served upon all parties to the above cause to each of the attorneys of record herein at their respective addresses disclosed on the pleading on 3/10, 2009
By: U.S. Mail facsimile
 Hand delivered Overnight courier
 Other email EFC

Signature Erik G. Kaardal

STATE OF IOWA**APPLICATION FOR PERMIT TO CARRY WEAPONS**

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

Professional Permit (WP1)
 Nonprofessional Permit (WP2)

Peace Officer Permit (WP7)
 Reserve Peace Officer Permit (WP10)
 Correctional Officer Permit (WP9)

New Application
 Renewal - Permit Number OSPO-3H6

Firearms Safety Training Certification Number or Peace Officer Certification Date 31221

Attach copy of WPD Firearms Safety Training Program Certificate of Completion (except certified peace officer).

Name Dorr Paul Robert Phone # (712) 758 - 3372
 (last) (first) (middle)Other Names Ever Used (aliases) N/AResidence 579 2nd Street Ocheyedan Iowa 51354
 (city) (state) (zip)Driver License or Non-Operator ID# _____ County of Residence OsceolaBirthdate 5/15/1956 Age 50 Sex M Hgt 6'1 1/2" Wgt 300 Hair BR Eyes BR**Authorization for Release - Weapon Permit Applications**

I, Paul R. Dorr, do hereby authorize a review and full disclosure of all records concerning myself, as required by Iowa Code chapter 724, to any duly authorized agent of an Iowa sheriff or the Commissioner of the Iowa Department of Public Safety, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of psychiatric treatment, substance abuse treatment, consultation and/or court ordered involuntary hospitalization including hospitals, clinics, private practitioners, the U.S. Veteran's Administration and clerks of court, as necessary to verify that I meet the requirements of the state of Iowa and the United States for the acquisition and possession of a firearm, and shall not be disseminated for any other purpose.

I understand that any information obtained which is developed directly or indirectly, in whole or part, upon this release authorization will be considered in determining my suitability for obtaining a permit to carry or acquire weapons in the state of Iowa. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for providing accurate information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that the information contained in these records will be used for no purpose other than those stated above; and will be kept strictly confidential by the office of the issuing official.

I understand that I may be convicted of a class "D" felony pursuant to Iowa Code section 724.10 if I make a false statement of material fact on this application.

I understand that all information provided on this application is considered public record and may be disclosed upon request.

This "Signature On File" will be valid from this date and shall expire in one year.

Applicant Signature Paul R. Dorr
WP5 Rev. 02/2003Date July 19, 2016

All of the following questions must be answered:

Yes No

- 1. Have you ever been convicted of a felony?
- 2. Have you ever been convicted of the misdemeanor crime of domestic abuse assault?
- 3. Have you ever been convicted of the misdemeanor crime of assault in violation of individual rights (hate crime)?
- 4. Have you ever been convicted of the misdemeanor crime of assault on a peace officer, jailer, correctional officer, fire fighter or health care provider?
- 5. Have you ever been convicted of the misdemeanor crime of setting a spring gun or trap?
- 6. Have you ever been convicted of the misdemeanor crime of hazing?
- 7. Have you ever been convicted of the misdemeanor crime of stalking?
- 8. Are you addicted to the use of alcohol or any controlled substance?
- 9. Do you have a history of repeated acts of violence?
- 10. Have you ever been adjudged mentally incompetent?

If you answered yes to any of the above, please explain: _____

11. Are you a citizen of the United States? If not, provide country of citizenship and alien registration number: Country of citizenship: _____ Alien registration number: _____

STATEMENT OF JUSTIFICATION

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

This statement is to contain clear and convincing evidence that this applicant may be required to use deadly force to protect his/her life or the life of another. The issuing officer may accept or reject this application for a permit to carry based on this narrative and other considerations.

Carry large amounts of cash on occasion of Self Defense.

Applicant Signature

Paul R. Davis

Date

July 19, 2006

EMPLOYER AUTHORIZATION

This section is to be completed by the employer of an applicant for a professional permit to carry weapons. This authorization affirms the above described justification for issuance as being an employment requirement.

Employer Name

Telephone

Employer Address

Employer Signature

Date

ISSUING OFFICER

MUST BE COMPLETED BY SHERIFF OR COMMISSIONER OF PUBLIC SAFETY

Application:

Approved

Disapproved

Date

02-20-06

Reason Disapproved:

Signature

Douglas A. Weiler

Sheriff of

Pocahontas County, Iowa

Commissioner of the Iowa Department of Public Safety

New Fee \$

Renewal Fee \$

Peace Officer/Correctional Officer - No Fee

STATE OF IOWA
APPLICATION FOR PERMIT TO CARRY WEAPONS

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

- Professional Permit (WP1)
 Nonprofessional Permit (WP2) Peace Officer Permit (WP7)
 Reserve Peace Officer Permit (WP10)
 Correctional Officer Permit (WP9)

- New Application
 Renewal - Permit Number 0570-346 (2006)

Firearms Safety Training Certification Number or Peace Officer Certification Date

Attach copy of WPO Firearms Safety Training Program Certificate of Completion (except certified peace officers).

Name Dorr Paul Robert Phone # (712) 758 - 3372
(last) (first) (middle)

Other Names Ever Used (aliases) Alice

Residence 579 2nd Street Ocheyedan Iowa 51354
(city) (state) (zip)

Driver License or Non-Operator ID# 509 W W 3353 County of Residence Osceola

Birthdate 5.15.1956 Age 51 Sex M Hgt 6'1" Wgt 320 Hair Br Eyes Br

Authorization for Release - Weapon Permit Applications

I, Paul R. Dorr, do hereby authorize a review and full disclosure of all records concerning myself, as required by Iowa Code chapter 724, to any duly authorized agent of an Iowa sheriff or the Commissioner of the Iowa Department of Public Safety, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of psychiatric treatment, substance abuse treatment, consultation and/or court ordered involuntary hospitalization including hospitals, clinics, private practitioners, the U.S. Veteran's Administration and clerks of court, as necessary to verify that I meet the requirements of the state of Iowa and the United States for the acquisition and possession of a firearm, and shall not be disseminated for any other purpose.

I understand that any information obtained which is developed directly or indirectly, in whole or part, upon this release authorization will be considered in determining my suitability for obtaining a permit to carry or acquire weapons in the state of Iowa. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for providing accurate information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that the information contained in these records will be used for no purpose other than those stated above, and will be kept strictly confidential by the office of the issuing official.

I understand that I may be convicted of a class "D" felony pursuant to Iowa Code section 724.10 if I make a false statement of material fact on this application.

I understand that all information provided on this application is considered confidential and will not be distributed outside my organization.

This "Signature On File" will be valid from this date and shall expire in one year.

Applicant Signature Paul P. Jones /
WP5 Rev. 09/2005

All of the following questions must be answered:

Yes No

- 1. Have you ever been convicted of a felony?
- 2. Have you ever been convicted of the misdemeanor crime of domestic abuse assault?
- 3. Have you ever been convicted of the misdemeanor crime of assault in violation of individual rights (hate crime)?
- 4. Have you ever been convicted of the misdemeanor crime of assault on a peace officer, jailer, correctional officer, fire fighter or health care provider?
- 5. Have you ever been convicted of the misdemeanor crime of setting a spring gun or trap?
- 6. Have you ever been convicted of the misdemeanor crime of hazing?
- 7. Have you ever been convicted of the misdemeanor crime of stalking?
- 8. Are you addicted to the use of alcohol or any controlled substance?
- 9. Do you have a history of repeated acts of violence?
- 10. Have you ever been adjudged mentally incompetent?

If you answered yes to any of the above, please explain: _____

11. Are you a citizen of the United States? If not, provide country of citizenship and alien registration number (ARN): _____

Country of citizenship: _____ Alien registration number: _____

STATEMENT OF JUSTIFICATION
TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

Occasionally carry large amounts of cash. Self-defense.

Applicant Signature

Paul TC Jopp //

Date July 7, 2007

EMPLOYER AUTHORIZATION

This section is to be completed by the employer of an applicant for a professional permit to carry weapons. This authorization affirms the above described justification for issuance as being an employment requirement.

Employer Name _____ Telephone _____

Employer Address _____

Employer Signature _____ Date _____

ISSUING OFFICER

MUST BE COMPLETED BY SHERIFF OR COMMISSIONER OF PUBLIC SAFETY

Application: Approved Disapproved Date 08-09-07

Reason Disapproved: Concern about Public. Don't trust Resin.

STATE OF IOWA

APPLICATION FOR PERMIT TO CARRY WEAPONS

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

- Professional Permit (WP1)
 Nonprofessional Permit (WP2)

- Peace Officer Permit (WP7)
 Reserve Peace Officer Permit (WP10)
 Correctional Officer Permit (WP9)

- New Application
 Renewal - Permit Number 143925

Firearms Safety Training Certification Number or Peace Officer Certification Date 74976

DEPOSITION EXHIBIT

5

PENCO 000-631-0988

JM 11-30-09

Attach copy of WP0 Firearms Safety Training Program Certificate of Completion (except certified peace officer)

Name <u>Kylee Chael</u>	A	Phone # <u>(712) 758-3211</u>
(last)	(first)	(middle)

Other Names Ever Used (aliases) _____

Residence <u>5819 Hwy 9</u>	<u>Ocheyedan</u>	IA	<u>51354</u>
(street)	(city)	(state)	(zip)

Social Security No. <u>481-98-3256</u>	County of Residence _____
--	---------------------------

Birthdate <u>11/25/77</u>	Age <u>22</u>	Sex <u>M</u>	Hgt. <u>5'11"</u>	Wgt. <u>210</u>	Hair <u>B</u>	Eyes <u>H</u>
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Authorization for Release - Weapon Permit Applications

I, _____, do hereby authorize a review and full disclosure of all records concerning myself, as required by Iowa Code chapter 708 (except sections 708.1 and 708.7) and chapter 724, to any duly authorized agent of an Iowa sheriff or the Commissioner of the Iowa Department of Public Safety, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of psychiatric treatment, substance abuse treatment, consultation and/or court ordered involuntary hospitalization including hospitals, clinics, private practitioners, the U.S. Veteran's Administration and clerks of court, as necessary to verify that I meet the requirements of the state of Iowa and the United States for the acquisition and possession of a firearm, and shall not be disseminated for any other purpose.

I understand that any information obtained which is developed directly or indirectly, in whole or part, upon this release authorization will be considered in determining my suitability for obtaining a permit to carry or acquire weapons in the state of Iowa. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for providing accurate information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that a person who gives a false name or presents false identification, or otherwise knowingly gives false material information on this application commits a class "D" felony (section 724.10 or 724.21).

I understand that the information contained in these records will be used for no purpose other than those stated above, and will be kept strictly confidential by the office of the issuing official.

This "Signature On File" will be valid from this date and shall expire in one year.

Applicant Signature Kylee Chael
 CFN 595-1162 WP5 Rev. 8/98

Date 8-31-02

All of the following questions must be answered:

Yes No

- | | | |
|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 1. Have you ever been convicted of a felony? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Have you ever been convicted of the misdemeanor crime of domestic abuse assault? |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 3. Have you ever been convicted of the misdemeanor crime of assault in violation of individual rights (hate crime)? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 4. Have you ever been convicted of the misdemeanor crime of assault on a peace officer, fire fighter or health care provider? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 5. Have you ever been convicted of the misdemeanor crime of setting a spring gun or trap? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Have you ever been convicted of the misdemeanor crime of hazing? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Have you ever been convicted of the misdemeanor crime of stalking? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 8. Are you addicted to the use of alcohol or any controlled substance? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9. Do you have a history of repeated acts of violence? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10. Have you ever been adjudged mentally incompetent? |

If you answered yes to any of the above, please explain: Out

STATEMENT OF JUSTIFICATION

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

This statement is to contain clear and convincing evidence that this applicant may be required to use deadly force to protect his/her life or the life of another. The issuing officer may accept or reject this application for a permit to carry based on this narrative and other considerations.

Hunting and Target shooting

Applicant Signature Jeff Kline

Date 8/31/00

EMPLOYER AUTHORIZATION

This section is to be completed by the employer of an applicant for a professional permit to carry weapons. This authorization affirms the above described justification for issuance as being an employment requirement.

Employer Name _____ Telephone _____

Employer Address _____

Employer Signature _____ Date _____

ISSUING OFFICER

MUST BE COMPLETED BY SHERIFF OR COMMISSIONER OF PUBLIC SAFETY

Application: Approved Disapproved Date _____

Reason Disapproved: _____

Signature Ed Hawley Sheriff of _____ County, Iowa

Commissioner of the Iowa Department of Public Safety

New Fee \$ _____ Renewal Fee \$ _____ Peace Officer/Correctional Officer - No Fee

STATE OF IOWA
APPLICATION FOR PERMIT TO CARRY WEAPONS

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

Professional Permit (WP1)
 Nonprofessional Permit (WP2)

Peace Officer Permit (WP7)
 Reserve Peace Officer Permit (WP10)
 Correctional Officer Permit (WP9)

New Application
 Renewal - Permit Number _____

Firearms Safety Training Certification Number or Peace Officer Certification Date _____

Attach copy of WP0 Firearms Safety Training Program Certificate of Completion (except certified peace officer)

Name S. Stanton Rick Alan Phone # (712) 754-3035
(last) (first) (middle)

Other Names Ever Used (aliases) _____

Residence 425 12th St. Sioux City IA 51104
(street) (city) (state) (zip)

Social Security No. (optional) or DL # 478-88-6811 County of Residence Oscoda -

Birthdate 8/18/69 Age 31 Sex M Hgt 5'10 Wgt 185 Hair Br. Eyes GR.

Authorization for Release - Weapon Permit Applications

I, Rick Stanton, do hereby authorize a review and full disclosure of all records concerning myself, as required by Iowa Code chapter 724, to any duly authorized agent of an Iowa sheriff or the Commissioner of the Iowa Department of Public Safety, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of psychiatric treatment, substance abuse treatment, consultation and/or court ordered involuntary hospitalization including hospitals, clinics, private practitioners, the U.S. Veteran's Administration and clerks of court, as necessary to verify that I meet the requirements of the state of Iowa and the United States for the acquisition and possession of a firearm, and shall not be disseminated for any other purpose.

I understand that any information obtained which is developed directly or indirectly, in whole or part, upon this release, authorization will be considered in determining my suitability for obtaining a permit to carry or acquire weapons in the state of Iowa. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for providing accurate information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that the information contained in these records will be used for no purpose other than those stated above, and will be kept strictly confidential by the office of the issuing official.

I understand that I may be convicted of a class "D" felony pursuant to Iowa Code section 724.10 if I make a false statement of material fact on this application.

I understand the issuing officer is permitted to request my social security number (SSN) on this permit application pursuant to Iowa Code section 724.10 for permits to carry. I further understand that I am not required to provide it. The SSN, if provided voluntarily, may be used in the background investigation to assist in accurate identification. The permit application forms and the permits are public records, and if I provide my SSN, it will become part of that public record and may be disclosed upon request. I will be required to provide my driver license (DL) or Iowa ID number if I do not provide my SSN.

I understand that all information provided on this application is considered public record and may be disclosed upon request.

This "Signature On File" will be valid from this date and shall expire in one year.

Applicant Signature Rick Stanton
WP5 Rev. 01/2001

Date 6-6-01

All of the following questions must be answered:

Yes No

1. Have you ever been convicted of a felony?
2. Have you ever been convicted of the misdemeanor crime of domestic abuse assault?
3. Have you ever been convicted of the misdemeanor crime of assault in violation of individual rights (hate crime)?
4. Have you ever been convicted of the misdemeanor crime of assault on a peace officer, fire fighter or health care provider?
5. Have you ever been convicted of the misdemeanor crime of setting a spring gun or trap?
6. Have you ever been convicted of the misdemeanor crime of hazing?
7. Have you ever been convicted of the misdemeanor crime of stalking?
8. Are you addicted to the use of alcohol or any controlled substance?
9. Do you have a history of repeated acts of violence?
10. Have you ever been adjudged mentally incompetent?

If you answered yes to any of the above, please explain: _____

11. Are you a citizen of the United States? If not, provide country of birth and alien registration number:

Country of birth: _____ Alien registration number: _____

STATEMENT OF JUSTIFICATION

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

This statement is to contain clear and convincing evidence that this applicant may be required to use deadly force to protect his/her life or the life of another. The issuing officer may accept or reject this application for a permit to carry based on this narrative and other considerations.

Applicant Signature _____ Date _____

EMPLOYER AUTHORIZATION

This section is to be completed by the employer of an applicant for a professional permit to carry weapons. This authorization affirms the above described justification for issuance as being an employment requirement.

Employer Name _____ Telephone _____

Employer Address _____

Employer Signature _____ Date _____

ISSUING OFFICER

MUST BE COMPLETED BY SHERIFF OR COMMISSIONER OF PUBLIC SAFETY

Application: Approved Disapproved Date _____

Reason Disapproved: _____

Signature CD Marbury Sheriff of _____ County, Iowa

New Fee \$ _____ Renewal Fee \$ _____ Commissioner of the Iowa Department of Public Safety
 Peace Officer/Correctional Officer - No Fee

STATE OF IOWA
APPLICATION FOR PERMIT TO CARRY WEAPONS

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

- Professional Permit (WP1)
 Nonprofessional Permit (WP2)
 Peace Officer Permit (WP7)
 Reserve Peace Officer Permit (WP10)
 Correctional Officer Permit (WP9)
- New Application
 Renewal - Permit Number _____

Firearms Safety Training Certification Number or Peace Officer Certification Date _____

Attach copy of WP0 Firearms Safety Training Program Certificate of Completion (except certified peace officer)

Name Nelson Donald F. Phone # (712) 736-2348
(last) (first) (middle)

Other Names Ever Used (aliases) None

Residence 31 Third Ave B apt 124 Melvin IA 51350
(street) (city) _____ (state) _____ (zip) _____

Social Security No. (optional) or DL # 475-26-4852 County of Residence Osceola IA

Birthdate 6/10/29 Age 72 Sex M Hgt 5-11 Wgt 190 Hair Bl Eyes Bl

Authorization for Release - Weapon Permit Applications

I, _____, do hereby authorize a review and full disclosure of all records concerning myself, as required by Iowa Code chapter 724, to any duly authorized agent of an Iowa sheriff or the Commissioner of the Iowa Department of Public Safety, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of psychiatric treatment, substance abuse treatment, consultation and/or court ordered involuntary hospitalization including hospitals, clinics, private practitioners, the U.S. Veteran's Administration and clerks of court, as necessary to verify that I meet the requirements of the state of Iowa and the United States for the acquisition and possession of a firearm, and shall not be disseminated for any other purpose.

I understand that any information obtained which is developed directly or indirectly, in whole or part, upon this release authorization will be considered in determining my suitability for obtaining a permit to carry or acquire weapons in the state of Iowa. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for providing accurate information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that the information contained in these records will be used for no purpose other than those stated above, and will be kept strictly confidential by the office of the issuing official.

I understand that I may be convicted of a class "D" felony pursuant to Iowa Code section 724.10 if I make a false statement of material fact on this application.

I understand the issuing officer is permitted to request my social security number (SSN) on this permit application pursuant to Iowa Code section 724.10 for permits to carry. I further understand that I am not required to provide it. The SSN, if provided voluntarily, may be used in the background investigation to assist in accurate identification. The permit application forms and the permits are public records, and if I provide my SSN, it will become part of that public record and may be disclosed upon request. I will be required to provide my driver license (DL) or Iowa ID number if I do not provide my SSN.

I understand that all information provided on this application is considered public record and may be disclosed upon request.

This "Signature On File" will be valid from this date and shall expire in one year.

Applicant Signature Donald F. Nelson
WP5 Rev. 01/2001

Date 6-26-01

All of the following questions must be answered:

Yes No

- 1. Have you ever been convicted of a felony?
- 2. Have you ever been convicted of the misdemeanor crime of domestic abuse assault?
- 3. Have you ever been convicted of the misdemeanor crime of assault in violation of individual rights (hate crime)?
- 4. Have you ever been convicted of the misdemeanor crime of assault on a peace officer, fire fighter or health care provider?
- 5. Have you ever been convicted of the misdemeanor crime of setting a spring gun or trap?
- 6. Have you ever been convicted of the misdemeanor crime of hazing?
- 7. Have you ever been convicted of the misdemeanor crime of stalking?
- 8. Are you addicted to the use of alcohol or any controlled substance?
- 9. Do you have a history of repeated acts of violence?
- 10. Have you ever been adjudged mentally incompetent?

If you answered yes to any of the above, please explain: _____

11. Are you a citizen of the United States? If not, provide country of birth and alien registration number:
Country of birth: _____ Alien registration number: _____

STATEMENT OF JUSTIFICATION

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

This statement is to contain clear and convincing evidence that this applicant may be required to use deadly force to protect his/her life or the life of another. The issuing officer may accept or reject this application for a permit to carry based on this narrative and other considerations.

Applicant Signature _____ Date _____

EMPLOYER AUTHORIZATION

This section is to be completed by the employer of an applicant for a professional permit to carry weapons. This authorization affirms the above described justification for issuance as being an employment requirement.

Employer Name _____ Telephone _____

Employer Address _____

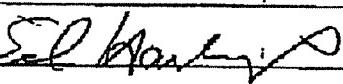
Employer Signature _____ Date _____

ISSUING OFFICER

MUST BE COMPLETED BY SHERIFF OR COMMISSIONER OF PUBLIC SAFETY

Application: Approved Disapproved Date _____

Reason Disapproved: _____

Signature  _____

Sheriff of _____ County, Iowa
 Commissioner of the Iowa Department of Public Safety
 Peace Officer/Correctional Officer - No Fee

New Fee \$ _____ Renewal Fee \$ _____

STATE OF IOWA

APPLICATION FOR PERMIT TO CARRY WEAPONS

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

- Professional Permit (WP1) Peace Officer Permit (WP7)
 Nonprofessional Permit (WP2) Reserve Peace Officer Permit (WP10)
 Correctional Officer Permit (WP9)
- New Application
 Renewal - Permit Number _____

Firearms Safety Training Certification Number or Peace Officer Certification Date _____

Attach copy of WP0 Firearms Safety Training Program Certificate of Completion (except certified peace officer)

Name Voss Eric T Phone # (712) 754-3125
(last) (first) (middle)

Other Names Ever Used (aliases) _____

Residence Sibley IA 51249
(city) (state) (zip)

Social Security No. (optional) or DL # 480-92-8163 County of Residence Osceola

Birthdate 9/17/68 Age 33 Sex M Hgt 6'1" Wgt 200 Hair Blond Eyes Blue

Authorization for Release - Weapon Permit Applications

I, Eric T. Voss, do hereby authorize a review and full disclosure of all records concerning myself, as required by Iowa Code chapter 724, to any duly authorized agent of an Iowa sheriff or the Commissioner of the Iowa Department of Public Safety, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of psychiatric treatment, substance abuse treatment, consultation and/or court ordered involuntary hospitalization including hospitals, clinics, private practitioners, the U.S. Veteran's Administration and clerks of court, as necessary to verify that I meet the requirements of the state of Iowa and the United States for the acquisition and possession of a firearm, and shall not be disseminated for any other purpose.

I understand that any information obtained which is developed directly or indirectly, in whole or part, upon this release authorization will be considered in determining my suitability for obtaining a permit to carry or acquire weapons in the state of Iowa. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for providing accurate information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that the information contained in these records will be used for no purpose other than those stated above, and will be kept strictly confidential by the office of the issuing official.

I understand that I may be convicted of a class "D" felony pursuant to Iowa Code section 724.10 if I make a false statement of material fact on this application.

I understand the issuing officer is permitted to request my social security number (SSN) on this permit application pursuant to Iowa Code section 724.10 for permits to carry. I further understand that I am not required to provide it. The SSN, if provided voluntarily, may be used in the background investigation to assist in accurate identification. The permit application forms and the permits are public records, and if I provide my SSN, it will become part of that public record and may be disclosed upon request. I will be required to provide my driver license (DL) or Iowa ID number if I do not provide my SSN.

I understand that all information provided on this application is considered public record and may be disclosed upon request.

This "Signature On File" will be valid from this date and shall expire in one year.

Applicant Signature Eric T. Voss
WP5 Rev. 06/2001

Date 10/15/01

All of the following questions must be answered:

Yes No

- 1. Have you ever been convicted of a felony?
- 2. Have you ever been convicted of the misdemeanor crime of domestic abuse assault?
- 3. Have you ever been convicted of the misdemeanor crime of assault in violation of individual rights (hate crime)?
- 4. Have you ever been convicted of the misdemeanor crime of assault on a peace officer, fire fighter or health care provider?
- 5. Have you ever been convicted of the misdemeanor crime of setting a spring gun or trap?
- 6. Have you ever been convicted of the misdemeanor crime of hazing?
- 7. Have you ever been convicted of the misdemeanor crime of stalking?
- 8. Are you addicted to the use of alcohol or any controlled substance?
- 9. Do you have a history of repeated acts of violence?
- 10. Have you ever been adjudged mentally incompetent?

If you answered yes to any of the above, please explain: _____

11. Are you a citizen of the United States? If not, provide country of birth and alien registration number:

Country of birth: _____ Alien registration number: _____

STATEMENT OF JUSTIFICATION

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

This statement is to contain clear and convincing evidence that this applicant may be required to use deadly force to protect his/her life or the life of another. The issuing officer may accept or reject this application for a permit to carry based on this narrative and other considerations.

Hunting, Target, Personal Protection

Applicant Signature Eric T. Voss Date 10/15/01

EMPLOYER AUTHORIZATION

This section is to be completed by the employer of an applicant for a professional permit to carry weapons. This authorization affirms the above described justification for issuance as being an employment requirement.

Employer Name _____ Telephone _____

Employer Address _____

Employer Signature _____ Date _____

ISSUING OFFICER

MUST BE COMPLETED BY SHERIFF OR COMMISSIONER OF PUBLIC SAFETY

NICS Transaction Number (NTN) _____ Date NTN Received _____

Application: Approved Disapproved Date of Approval/Disapproval _____

Reason Disapproved: _____

Signature Ed Hartley Sheriff of _____ County, Iowa

Commissioner of the Iowa Department of Public Safety

New Fee \$ _____ Renewal Fee \$ _____ Peace Officer/Correctional Officer - No Fee

STATE OF IOWA

APPLICATION FOR PERMIT TO CARRY WEAPONS

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

- Professional Permit (WP1)
 Nonprofessional Permit (WP2)
 New Application
 Renewal - Permit Number _____
- Peace Officer Permit (WP7)
 Reserve Peace Officer Permit (WP10)
 Correctional Officer Permit (WP9)

Firearms Safety Training Certification Number or Peace Officer Certification Date _____

Attach copy of WPD Firearms Safety Training Program Certificate of Completion (except certified peace officer)

Name Voss ARIE R Phone # (312) 754-3125
(last) (first) (middle)

Other Names Ever Used (aliases) _____

Residence Sibley IA 51149
(city) (state) (zip)

Social Security No. (optional) or DL # 6524118394 County of Residence Pocahontas

Birthdate 6/14/37 Age 64 Sex M Hgt 6 Wgt 190 Hair B Eyes B

Authorization for Release - Weapon Permit Applications

I, ARIE Voss, do hereby authorize a review and full disclosure of all records concerning myself, as required by Iowa Code chapter 724, to any duly authorized agent of an Iowa sheriff or the Commissioner of the Iowa Department of Public Safety, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of psychiatric treatment, substance abuse treatment, consultation and/or court ordered involuntary hospitalization including hospitals, clinics, private practitioners, the U.S. Veteran's Administration and clerks of court, as necessary to verify that I meet the requirements of the state of Iowa and the United States for the acquisition and possession of a firearm, and shall not be disseminated for any other purpose.

I understand that any information obtained which is developed directly or indirectly, in whole or part, upon this release authorization will be considered in determining my suitability for obtaining a permit to carry or acquire weapons in the state of Iowa. I also certify that any person(s) who may furnish such information concerning me shall not be held accountable for providing accurate information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

I understand that the information contained in these records will be used for no purpose other than those stated above, and will be kept strictly confidential by the office of the issuing official.

I understand that I may be convicted of a class "D" felony pursuant to Iowa Code section 724.10 if I make a false statement of material fact on this application.

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I understand that all information provided on this application is considered public record and may be disclosed upon request.

This "Signature On File" will be valid from this date and shall expire in one year.

Applicant Signature _____
WP5 Rev. 06/2001

Date 10-15-01

All of the following questions must be answered:

Yes No

- 1. Have you ever been convicted of a felony?
- 2. Have you ever been convicted of the misdemeanor crime of domestic abuse assault?
- 3. Have you ever been convicted of the misdemeanor crime of assault in violation of individual rights (hate crime)?
- 4. Have you ever been convicted of the misdemeanor crime of assault on a peace officer, fire fighter or health care provider?
- 5. Have you ever been convicted of the misdemeanor crime of setting a spring gun or trap?
- 6. Have you ever been convicted of the misdemeanor crime of hazing?
- 7. Have you ever been convicted of the misdemeanor crime of stalking?
- 8. Are you addicted to the use of alcohol or any controlled substance?
- 9. Do you have a history of repeated acts of violence?
- 10. Have you ever been adjudged mentally incompetent?

If you answered yes to any of the above, please explain: _____

11. Are you a citizen of the United States? If not, provide country of birth and alien registration number:

Country of birth: Costa Rica Alien registration number: _____

STATEMENT OF JUSTIFICATION

TYPE OR PRINT IN INK - MUST BE COMPLETED BY APPLICANT

This statement is to contain clear and convincing evidence that this applicant may be required to use deadly force to protect his/her life or the life of another. The issuing officer may accept or reject this application for a permit to carry based on this narrative and other considerations.

Hunting & Target Personal Protection

Applicant Signature Erica L. Jones

Date 10-15-01

EMPLOYER AUTHORIZATION

This section is to be completed by the employer of an applicant for a professional permit to carry weapons. This authorization affirms the above described justification for issuance as being an employment requirement.

Employer Name _____ Telephone _____

Employer Address _____

Employer Signature _____ Date _____

ISSUING OFFICER

MUST BE COMPLETED BY SHERIFF OR COMMISSIONER OF PUBLIC SAFETY

NICS Transaction Number (NTN) _____ Date NTN Received _____

Application: Approved Disapproved Date of Approval/Disapproval _____

Reason Disapproved: _____

Signature S. Hawley Sheriff of _____ County, Iowa

Commissioner of the Iowa Department of Public Safety

New Fee \$ _____ Renewal Fee \$ _____ Peace Officer/Correctional Officer - No Fee

1 UNITED STATES DISTRICT COURT

2 NORTHERN DISTRICT OF IOWA

3 * * * * *

4 PAUL DORR and ALEXANDER DORR, * File No. 5:08-CV-0
5 individually and on behalf of all *
other persons similarly situated, *

6 Plaintiffs, *

7 vs. * DEPOSITION OF

8 DOUGLAS L. WEBER, individually and * DOUGLAS L. WEBER
9 in his capacity as Sheriff, and his *
successors, THE OSCEOLA COUNTY *
SHERIFF'S DEPARTMENT, IOWA, and *
10 OSCEOLA COUNTY, IOWA, *

11 Defendants. *

12 * * * * *

13 The deposition of Douglas L. Weber was taken on behalf of
14 the Plaintiffs at the Osceola County Courthouse in Sibley,
15 Iowa on Monday, November 30, 2009 commencing at 10:00 a.m.

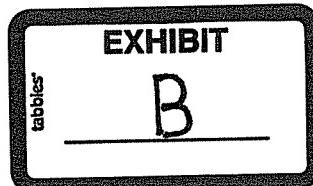
16 APPEARANCES

17 For the Plaintiffs: MR. VINCENT J. FAHNLANDER
Attorney at Law
18 33 South Sixth Street, Suite 4100
Minneapolis, Minnesota 55402

22 Other Appearances: Paul R. Dorr

23

24 Reported By: Jenna L. Mumm, CSR
703 Jackson Avenue, Spirit Lake, Iowa 51360
25 (712) 336-4125 (800) 551-5027



1 feel comfortable giving him a permit. You know, I just had
2 that gut feeling. I didn't like the guy, I did it anyway.
3 I'm embarrassed about it now. I regret it, just like I'm
4 sure Mr. Huckabee will regret giving clemency to the guy out
5 in Tacoma, Washington who shot the cops. I regret that I
6 did that, but I know more in '07 than I did then. I know
7 more now than I did back then and I'll know more in a year
8 or two from now than I do now.

9 Q Well, tell me what changed between '07 and '06. '06
10 you granted his application, '07 you denied his
11 application. What changed in that time period?

12 A Well, you brought up the OCTA, Mr. Dorr's affiliation
13 with that. He started sending out letters to the editor,
14 e-mails, fliers on doors and cars, handing out brochures.

15 People talked about it. See, people don't care about
16 Mr. Dorr. I mean, they're not sitting around, "Oh, boy,
17 what's Mr. Dorr's gonna say today, because we want to learn
18 something." They don't care. I think he's a narcissist.
19 It doesn't matter in and of itself. That's okay. That's
20 okay--

21 Q Uh-huh (yes).

22 A -- that Mr. Dorr's a narcissist. I don't care, but he
23 thinks that everybody-- he thinks his reputation is
24 peerless. It's not. I'm sorry, it just isn't. It's
25 lousy. It's lousy in northwest Iowa. Now I forget where I

1 was going with this, but if you put all that together...

2 Q Okay.

3 A And so I've been in this business 30 years, and you
4 can't tell a nut they're a nut. It doesn't work.

5 Q Okay.

6 A You can't argue with a drunk.

7 Q Okay. So what changed-- now, my question was what
8 changed between '06 and '07.

9 A Okay. Okay.

10 Q And I think what you--

11 A Now you got me on track.

12 Q -- what you told me was what-- what changed is that--
13 at least one of the things that changed is he was doing this
14 work with the OCTA, the Osceola County Taxpayers

15 Association, he was sending out letters.

16 A Okay. Good. Thanks. Now you brought me back to where
17 I tried to start out. He interjected himself into the
18 public view or conscience or whatever you want to call-- the
19 consciousness, whatever you want to call it. People started
20 talking about him. I'm setting there, boy, he's got a
21 permit with my name on it. You know what, I-- you know, I--
22 I'm concerned about it, because I don't like that.

23 And my cop gut feeling was that, you know, something
24 isn't right here. If he did do something really weird, I
25 don't want to be responsible and, you know, he's got a

1 permit with my name on it. I'm embarrassed about it. I
2 feel bad about it, but I did what I felt I-- had to be-- had
3 to be done. I was elected sheriff to make a decision, and
4 people voted for me to make decisions concerning public
5 safety issues. If they don't like my decision, they won't
6 vote for me--

7 Q Uh-huh (yes).

8 A -- and somebody else will get in, so-- I've been
9 elected twice to make decisions on public safety issues.

10 Q Okay.

11 A So to answer your question, that's what's changed, is
12 that he was a lot more active locally. I think a lot of his
13 activities-- I read a newspaper article, "The Gospel

14 According to Paul Dorr," where he does other work in other
15 towns, other states and so forth. So we don't really hear
16 that here, but-- so he was kind of out of the public view,
17 I-- in my opinion.

18 Q And it was his work with the OCTA that brought him into
19 your public view?

20 A Correct, and people started talking about it saying
21 things like, "Oh, that guy's a nut job. Oh, that guy's
22 whacko."

23 Q Okay. Now, I was asking you about Exhibit 6, the
24 persons with discoverable information, and I asked you about
25 Dan DeKoter.

 COPY

1

1 IN THE UNITED STATES DISTRICT COURT
2 FOR THE NORTHERN DISTRICT OF IOWA
2 WESTERN DIVISION

3 PAUL DORR and) No.
4 ALEXANDER DORR,) 5:08-cv-040903-MWB
5 Individually and On)
6 Behalf of All Other)
7 Persons Similarly)
8 Situated,)
9 Plaintiffs,)
10 vs.)
11 DOUGLAS L. WEBER,)
12 Individually and In)
13 His Capacity as)
14 Sheriff, and His)
15 Successors, THE)
16 OSCEOLA COUNTY)
17 SHERIFFS DEPARTMENT,)
18 IOWA, and OSCEOLA)
19 COUNTY, IOWA,)
20 Defendants.)

14 * * * *
15 Telephonic Deposition of PAUL DORR, the
16 deponent herein, taken on behalf of the
17 defendants herein, at 4280 Sergeant Road, Suite
18 290, Sioux City, Iowa, on Wednesday, January
19 13, 2010 at 10:03 a.m., before Norine F.
20 Kennedy, Certified Shorthand Reporter in and
21 for the State of Iowa, of Kennedy & Kennedy,
22 Certified Court Reporters, 308 24th Street,
23 Sioux City, Iowa.

24 APPEARANCES:

25 MR. VINCENT J. FAHNLANDER
26 Attorney at Law, of
27 Mohrman & Kaardal P.A.
28 33 South Sixth Street
29 Suite 4100
30 Minneapolis, Minnesota 55402

31 Appearng on behalf of the Plaintiffs;
32
33

1 APPEARANCES: (Continued)

2 MR. DOUGLAS PHILLIPS
3 Attorney At Law, of
Klass Law Firm
4 4280 Sergeant Road
Suite 290
Sioux City, Iowa 51106

5 Appearng on behalf of the Defendants.

6 * * * *

7 Also Present: Alexander Dorr

* * * *

8 Reported by Norine F. Kennedy, CSR, CP, RPR

* * * *

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1 highest ranking ones who had three supervisors.
2 So the questions began to raise a year, year
and a half ago is -- Well, the one, that the
- supervisors can't control the budget because
5 they're some of the ones that are the most
6 overpaid of all. So it has been a very strong
7 point of contention by the OCTA in the last
8 year, year and a half.

9 Q. What other similar issues has OCTA been
10 involved with where you have consulted?

11 A. I'm just -- I'm trying to go back in
12 memory for the last couple two, three years,
13 and right now that's all I can recall.

14 Q. Is it your contention that Sheriff Weber
15 denied your concealed carry permit at least in
16 part because of your affiliation with OCTA?

17 A. Yes.

18 Q. Why do you think that?

19 A. Because there had been no incident, no
20 activity, nothing relative to the use of a
21 firearm any time prior to this. He had -- He
22 had issued me permits previously. And then in
23 '07 when I started working for the OCTA, I
24 started receiving letters and communications
-- from Dan DeKoter defending the sheriff's budget

25

27

1 and the county attorney's budget and basically
2 legally threatening me and my client.
3 Initially Mr. DeKoter thought my client was a
4 member or two of the board of supervisors. And
5 I didn't reveal to him because I had no duty to
6 do that. He was just a private citizen. But
7 Mr. DeKoter rapidly made the whole issue rather
8 contentious within the community and then
9 started going into the newspapers attacking me.
10 So this is all stirring through 2007. And so
11 then from the time, the end of July, early
12 August 2007 when my permit was up for renewal
13 and I called the sheriff and he said, I want to
14 talk to you about it this time, you need to
15 stop in, I strongly suspicioned -- Because
16 there was no -- nothing else that had changed,
17 I strongly suspicioned that -- that my working
18 for the OCTA was -- was driving this meeting to
19 come in there. And it's why in fact I carried
20 my digital recorder into the meeting. And
21 later now in depositions he's kind of affirmed
what I suspicioned. And in that meeting, if
23 you've had a chance to look at his video, I
24 asked him if he had any evidence of anything
25 that I said that may have prompted this false

1 accusation of fear, and he said no. So in my
2 mind I'm sitting here thinking, He's got
3 unnamed accusers and they have -- by his own
4 admission they have no evidence. And at that
5 point I asked him, Is this personal? And he
6 naturally denied it. But I -- I had reached
7 the conclusion in my mind then he's punishing
8 me for simply helping the OCTA exercise their
9 free speech.

10 Q. Did he say anything -- I'm sorry. Go
11 ahead.

12 A. And -- and my own free speech. At some
13 point -- I'll have to go back to the '07
14 letters to the editor, but at some point
15 Mr. DeKoter started attacking me personally in
16 the papers for my involvement with them, and so
17 I had to, you know, defend my character and
18 reputation. So then I went in the papers and
19 defended myself and made most of Mr. DeKoter's
20 arguments look, I believe, rather foolish. But
21 it was at that moment that -- in the midst of
22 that controversy that I was then denied my
23 permit.

24 Q. Is there some connection between
25 DeKoter's letters and the denial of your permit

1 application?

2 A. We don't know -- I don't know what the
3 connection was. He just seemed to have privy
4 to a lot of the stuff that I was doing for OCTA
5 and the county, and that was one of the
6 questions that always was listed with the OCTA.
7 He's not the county's attorney, he's not
8 retained by the Public Safety Commission to
9 represent them. Why -- How is he getting all
10 this knowledge about what we're doing, and why
11 is he sticking his nose into this relationship?
12 So you know, what connection there is -- Well,
13 I think it's illustrated by July of 2008 where
14 Mr. DeKoter is sending me a letter stating he
15 represents the Public Safety Commission when in
16 fact he did not.

17 Q. Were you ever able to answer those
18 questions raised by OCTA, namely, where's
19 DeKoter getting his information and why is he
20 involved in this?

21 A. I did e-mail Mr. DeKoter at one time and
22 asked him a simple question, Are you the one
23 that went to Sheriff Weber and told him you
24 were afraid of me? He sent me a single line
25 response back stating, Please stop harassing

1 me. The implied assumption was that I had --
2 there's been a pattern of some sort of
3 harassment. But I believe in Mr. DeKoter's
4 mind that anybody questioning him in the paper
5 and challenging his deceptions, to his mind
6 that was harassment.

7 There had been no other
8 communication with Mr. DeKoter on any of these
9 issues in the county for 20 years or ever that
10 I know of. And so when I asked him if he was
11 the one that went to Sheriff Weber, he didn't
12 answer the question. He just -- just implied
13 that I was harassing him.

14 So no, we don't know of a
15 connection, but his involvement in July of 2008
16 with his letters gave me strong suspicion that
17 he was in fact having some ongoing
18 communication with the sheriff.

19 Q. Did Sheriff Weber say anything in his
20 conversation with you in his office that led
21 you to believe he was denying your application
22 because of your relationship with OCTA?

23 A. No, he did not.

24 Q. Did he -- What is it that he said in his
25 deposition that makes you think this was a

1 factor in the decision to deny your
2 application?

3 A. His response to my attorney's questions
4 about OCT, my OCT involvement that summer, and
5 he said yes, writing letters and putting
6 pamphlets on cars and distributing handbills
7 and so forth. I don't have the exact quote in
8 front of me, but it was -- it was that and I
9 think he had kind of affirmed it again a little
10 bit later.

11 Q. In your first deposition you and I spent
12 quite a bit of time on the question of how have
13 you been harmed by all of this, what are your
14 damages. I don't expect you to have memorized
15 our discussion, but do you generally remember
16 that we talked about that?

17 A. Yes.

18 Q. My question for you today is this, is
19 there some separate item of damage or
20 additional harm that we haven't already
21 discussed that arises out of your belief that
22 the denial was premised at least in part on
23 your association with OCTA?

24 A. Yes. Until I sought legal counsel and
25 sought redress of my grievance against the

1 sheriff, until -- and until the lawsuit was
2 filed which I assume then that you would
3 counsel him to not continue abridging my free
4 speech rights, before that period from the time
5 he denied me until that period, I was
6 questioning much of what I was doing and
7 assuming and looking at what else is he going
8 to do to harm me if I write this or publish
9 this or state that. So there was -- there
10 was -- And I'd have to go back and look at some
11 of the material, but I -- I -- as memory
12 serves, there was some material that didn't get
13 distributed because I was now frightful.

14 He then went on in April of 2008
15 when my wife applied, and she waited a couple
16 weeks, and he said -- She called him up and he
17 said, I would like to -- I'm not sure yet. I
18 need a -- I need to contemplate on this. Give
19 me 30 days. And my wife reported to me that
20 she said to him, Well, is there something
21 you're going to discover or understand or know
22 in 30 days that you don't know now? Is there
23 any questions I can answer for you that will
24 help you make this decision? And he said, No.
25 He said, I just need to -- I think the word was

1 meditate on this for 30 days.

2 And at that point she came to me
3 and said, What's going on? I looked at the
4 calender and I realized his primary election
5 was up in 30 days. So I strongly suspicion
6 then that he was punishing my wife and trying
7 to silence me by dangling her permit out there
8 until he got re-elected. I can't -- I don't
9 know if that happened, but he had -- he had no
10 reason, he gave her no reason, he wasn't doing
11 any further investigation, he had no questions
12 for her, nothing more than I just need 30 days
13 to meditate on this. Normally my family gets
14 those -- With me in the past, in a week's time
15 it's done. He's done his background research
16 and the permit is issued. So by April of 2008
17 we began to really suspicion that if I spoke
18 out he was going to look for some kind of way
19 to punish me.

20 Q. Your wife got her permit?

21 A. Yes, after some -- some communication
22 back and forth. She withdrew her permit -- the
23 application at that time because she was not
24 going to be part of his gamesmanship, and then
25 later reapplied in July of '08 and that's then